Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

58511.019

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | | | | | | | |
|--|---|---|------------------|---|---------------------------------|-----------------------------|----------|---|------------------------|---------|-------------------------------|------------------------|--|--|--|--|--|--|--|
| TOTAL CLAIMS | | | 7 á | | , Soluli | 2 | ŗ | RATE | FEE | | RATE | FEE | | | | | | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | E | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | | | | | | | |
| TOTAL CHARGEABLE CLAIMS | | | 22 minus 20= | | * | | Ī | X\$ 9= | 2 | OR | X\$18= | 36 | | | | | | | |
| INDEPENDENT CLAIMS | | |) minus 3 = * | | | , | Ī | X40= | | OR | X80= | (| | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | - | +135= | , | OR | +270= | | | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | L | TOTAL | · · · · · | OR | TOTAL | 746 | | | | | | | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | ENTITY | OR | OTHER SMALL I | THAN | | | | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR *** Continue | | | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | | |
| NON N | Total | 12 | <u> </u> | | | | _X\$ 9= | | OR | X\$18=_ | | | | | | | | | |
| AME | Independent • Minus FIRST PRESENTATION OF MULTIPLE DEP | | | *** | T CL AIM | = - | | X40= | - | OR | X80= | | | | | | | | |
| لـــا | FIRST PRESERVI | ATION OF WIC | DETIFICE DEF | ENDEN | CLAIM | | ' | +135= | | OR | +270= | | | | | | | | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | 74/0 | | | | | | | |
| | | | ODII.I LE | | • | | 7 | | | | | | | | | | | | |
| AMENDMENT B | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | CLAIMS REMAINING AFTER MENDMENT | | NUN PREV | HEST MBER IOUSLY) FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | | |
| NOW | Total + | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | | | | | | | |
| AME | Independent * | *** | Minus | *** | T OL 4114 | <u> </u> | [| X40= | | OR | X80= | | | | | | | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDE | | | | DENT CLAIM | | | +135= | | OR | +270= | | | | | | | | |
| | | | | | * | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | | | | | |
| · | | (Column 1) | | | ımn 2) | (Column 3) | _ | | | | | • | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUI PREV | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | | |
| | Total * | | Minus | ** | | = | | X\$.9= | N. ma. | OR | X\$18= | | | | | | | | |
| | Independent + | | Minus | *** | | = |] | X40= | ì | OR | X80= | | | | | | | | |
| | FIRST PRESENT | TATION OF M | ULTIPLE DEI | PENDEN | IT CLAIM | | ┧╽ | +135= | | OR | +270= | | | | | | | | |
| | If the entry in column | 1 is less than t | he entry in colu | ımn 2, wri | ite "0" in co | lumn 3. In 20. enter "20 | | TOTAL | | OR | TOTAL | - | | | | | | | |
| | If the "Highest Numb | er Previously P | aid For" IN TH | IS SPACE | E is less tha | an 3, enter "3." | • | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |